FEB 2 2 2006 (12-04v2) Approved for use through 07/31/2006, OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Panerwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number Effective on 12/08/2004. Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number 10/655858 TRANSMI Filing Date 9/5/2003 For FY 2005 First Named Inventor Sharp **Examiner Name** Boutsikaris Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2872 TOTAL AMOUNT OF PAYMENT 180.00 Altorney Docket No. 95121961.206001 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 13-0480 Deposit Account Name: Baker McKenzie LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES** Small Entity Small Entity **Small Entity** Application Type Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) **Utility** 300 150 500 200 250 100 Design 200 100 100 130 50 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 250 600 300 Provisional Provisional 200 100 0 Λ n 0 2. EXCESS CLAIM FEES Small Entity Fee Description Eee (\$) Fee (\$) Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims - 2D or HP = Fee Paid (\$) Fee (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) -3 br HP = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

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- 2. Information Disclosure Statement
- 3. SB/08A and SB/08B;
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